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CONFIRMATION NO. 4769

SERIAL NUMBER 10/679,971	FILING OR 371(c) DATE 10/06/2003 RULE	CLASS 380	GROUP ART UNIT 2196	ATTORNEY DOCKET NO. 493-37-3	
<b>APPLICANTS</b> Robert M. Best, Fort Myers, FL;					
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/639,038 08/11/2003 ABN and is a CIP of 10/613,902 07/03/2003 ABN <i>kn</i> and is a CIP of 10/427,793 04/30/2003 <i>kn</i> and is a CIP of 10/135,319 04/29/2002 ABN <i>kn</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>None kn</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 12/30/2003</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>kn</i> Examiner's Signature _____ Initials _____		STATE OR COUNTRY FL	SHEETS DRAWING 22	TOTAL CLAIMS 69	INDEPENDENT CLAIMS 7
<b>ADDRESS</b> 000996					
<b>TITLE</b> Copy protection of portable game software					
<b>FILING FEE RECEIVED</b> 1264	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		